

WAREHAM AND PURBECK RURAL DISTRICT COUNCIL.
-----ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1944.PUBLIC HEALTH OFFICERS.Medical Officer of Health

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Sanitary Inspectors

E. SMITH.

Certificate of the Royal Sanitary Institute and
Sanitary Inspectors' Examination Joint Board.
Meat and Other Foods Certificate Royal Sanitary
Institute.
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A.T. SELVEY.

Certificate of the Royal Sanitary Institute and
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The Medical Officer of Health also holds the appointments of
Medical Officer of Health to Wareham Borough Council, Swanage Urban
District Council, and Assistant Medical Officer to Dorset County
Council.

Public Health Office,
12a. Institute Road,
Swansea.

To the Chairman and Members of the
Marchon and Furbeck Rural District Council.

Mr. Chairman and Gentlemen,

I have the honour to present to you my Annual Report on the health and sanitary conditions of the Marchon and Furbeck Rural District for the year 1944. The report is limited to essential statistics and important changes which have taken place during the year.

The birth rate for the district, 20.1, as compared with 17.6 for England and Wales, is 2.7 lower than the figure for 1943. The death rate for the district, 11.0, as compared with 11.6 for England and Wales, is 0.2 higher than the figure for 1943.

During the year 68 cases of Sonne Dysentery were notified; 57 of these cases occurred at a residential school. A full account of the outbreak is given in the body of this report.

The prevalence of Measles and Whooping Cough remained high as in the previous year; the notification rates for these diseases and for Pneumonia were higher than those for England and Wales. There was only one death from notifiable infectious disease, pneumonia, during the year.

The number of cases of Scabies and Vermineous Conditions notified show a decrease on the 1943 figures, Scabies from 184 to 54, Vermineous Conditions of the Scalp 76 to 41.

New cases of Tuberculosis notified show an increase of 14 in Pulmonary Tuberculosis, and decrease of 2 in Non-pulmonary Tuberculosis on the figures for 1943. Deaths from Pulmonary Tuberculosis were 6 compared with 4 for 1943. There were no deaths from Non-pulmonary Tuberculosis.

The percentage of houses in each parish supplied by various types of water supply is given in tabular form in this report. Only 30% of houses in the district have a water supply indoors from a public piped supply or from an estate short piped supply. In many of the smaller houses full use is not made of the water supply there being no bathroom, hot water supply system, or water closet.

Preliminary plans for the Council's post-war scheme for public main water supply to every parish in the district has been formulated by the Council's Consulting Engineers. The Council have also prepared post-war sewerage schemes for the principal villages in the district. When these schemes for water supply and sewerage materialise another and very difficult problem will present itself, that is, how to ensure that every house will eventually have the full benefit of these schemes. The problem is bound up with that of reconditioning of the older houses in the district and is one in rural areas of greater magnitude and less easy solution, at present, than the provision of new houses.

During the year two pairs of new houses of the three bedroom parlour type were completed at West Morden under the wartime emergency programme for housing agricultural workers. The Council considered layout plans for houses on sites already owned by the Council as part of the post-war housing programme; the sites, at Arne Stoborough, Bere Leys, Studland, Wool, and Bovington, are to take a total of 88 houses.

The importance of siting new houses has been mentioned in previous reports. In general it may be said that these sites should be in the larger villages where services such as water supply, drainage, electricity, are likely to be available, where there is the possibility of some form of social life for the inhabitants, and schools reasonably near for their children.

I wish to thank the members of the Council for their kindness and consideration during the year, and the Sanitary Inspectors and other Officials of the Council for their co-operation in the work of the public health and sanitary services.

I am, Gentlemen,

Your obedient Servant,

E.J. O'KEEFE.

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area. - 95,954 acres.

Population. Registrar-General's estimate of
 (a) Resident Population, Mid. 1944)
 (b) Average Population appropriate to the calculation of death rate) 14,520

Number of inhabited houses (end of 1944) according to the rate book .. 4,370
 Rateable value £86,855
 Sum represented by a penny rate £1.35-7-10

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

		Total.	M.	F.	
Live Births	) Legitimate	261	144	117	) Birth rate per 1,000 estimated
	) Illegitimate	31	19	12	) resident population .. 20.1
Still Births	) Legitimate	5	2	3	) Rate per 1,000 (live and
	) Illegitimate	-	-	-	) still) births .. 10.3
Deaths		161	85	76	) Death rate per 1,000 estimated
					average population .. 11.0

Deaths from Puerperal Causes (Headings 29 and 30 of the Registrar-General's short list):-

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29. Puer: Post-abortion: sensis .. -	-	-
No. 30. Other Puerperal causes .. -	-	-
Total	-	-

Deaths of infants under one year of age:-

	Total.	M.	F.
Legitimate	9	4	5
Illegitimate	-	-	-

Death rate of infants under one year of age:-

All infants per 1,000 live births	30.8
Legitimate infants per 1,000 legitimate live births ..	34.4
Illegitimate infants per 1,000 illegitimate live births ..	-

Deaths from Cancer (all ages) ..	24
Deaths from Measles (all ages) ..	-
Deaths from Whooping Cough (all ages) ..	-
Deaths from Diarrhoea (under 2 years) ..	1

Birth, Death, Infant and Maternal Mortality Rates during the Year 1944.

	Births per 1,000 Population		Deaths All Causes per 1,000 Population	Deaths under 1 year of age per 1,000 Live Births	Deaths from Diarrhoea and Enteritis under 2 years of age per 1,000 Live Births
	Live Births	Still Births			
England and Wales	17.6	0.50	11.6	46	.8
148 Smaller Towns estimated resident population 25,000 - 50,000 at 1931 Census	20.9	0.61	12.4	44	.4
WAREHAM AND PURBECK	20.1	0.34	11.0	30	3.4

Maternal Mortality:-

	Abortion with Sepsis	Abortion without Sepsis	Puerperal Infections	Other
England and Wales	0.31	0.09	0.28	1.25
WAREHAM AND PURBECK	-	-	-	-

There were no specially noteworthy causes of sickness or invalidity during the year, nor any conditions of occupation or environment which would appear to have a prejudicial effect on health.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

There was no change during the year in the services provided in the area.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.

There have been no alterations in the sources and distribution of water supplies during the year.

The table on the next page gives the percentage of houses in the parishes and the district as a whole supplied by various types of water supply. The figures, which are approximate, are supplied by the sanitary inspectors and are mainly based on the result of the pre-war housing survey.

The following are particulars of samples of water taken during the year for bacteriological examination:-

Total number of samples from Village Piped Supplies and Wells	...	53
" " " " which gave highly satisfactory results	...	17
" " " " " " satisfactory results	...	9
" " " " " " suspicious results	...	14
" " " " " " unsatisfactory results	...	13
Total number of samples from Private Supplies and Wells	...	54
" " " " which gave highly satisfactory results	...	-
" " " " " " satisfactory results	...	3
" " " " " " suspicious results	...	4
" " " " " " unsatisfactory results	...	27

Samples taken for chemical analysis:-

Total number of samples from Wells	...	...	...	5
" " " " which gave satisfactory results	...	...	...	3
" " " " " " unsatisfactory results	...	...	...	2

A Due to presence of excess of iron.

Sewerage and Drainage.

There have been no alterations in sewerage and drainage in the district during the year. West Lulworth Village and Bestwall Estate Wareham St. Martin are the only parts of the district where there is main sewer drainage.

The Council have prepared sewerage schemes for the villages of Langton Matravers, Corfe Castle, and Wool, for post-war development. There are other areas in the district where drainage problems are also pressing, in particular Upton, Letchett Matravers, and Sandford, where there is the recurring nuisance of overflowing cesspools of the newer houses which have bathrooms and water closets installed. Conditions in the Sandford area in this respect are particularly bad and the Council will have to consider in the near future the practicability of a small sewerage scheme for this area.


Rivers and Streams Pollution.

No serious pollution of rivers and streams in the district was reported during the year.

Two samples of sewage effluent as discharged into the River Frome at Bovington were taken for analysis. One was reported on by the analyst as satisfactory and the other was a poor effluent as it exceeded the standards laid down by the Royal Commission for Sewage Treatment.

A sample of river water taken from The Frome at Iolme Bridge was reported on by the analyst as satisfactory. A sample of sewage effluent as discharged into the Swaney Stream from a service establishment's sewerage works at Langton Matravers taken for analysis was reported on as a bad effluent.

SANITARY OF SANITARY INSPECTORS' VISITS AND NOTICES SERVED DURING THE YEAR.



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Percentage of Houses Supplied by Various Types of Water Supply.

Parish	Public Piped Supply.		Private Estate Piped Supplies		Parish or Public Well not piped		Privately Owned Wells		Stream or Surface Springs	Main-water Tanks	Remarks
	to house standpipe	to house standpipe	to house standpipe	to house standpipe	Well not piped	Well not piped	Owned Wells	not piped to house			
Wareham St. Martin	7.1	-	3	-	-	-	6	16	0.5	-	Public piped supply } Wareham Borough Supply - 17% Poole Borough Supply - 83%
West Lulworth	-	-	43	50	-	-	2	5	-	-	Shortage in dry seasons
North Watravors	-	-	-	-	38	-	3	9	-	50	
Church Knowle	-	-	7.5	42	7.5	-	1	29	13	-	
East Lulworth	-	-	23	65	-	-	-	4	3	5	
Arne	1	3	4	8	14	-	10	60	-	-	Public piped supply from Wareham Borough Supply.
Kimmeridge	-	-	8	92	-	-	-	-	-	-	Unsatisfactory and inadequate.
East Molton	-	-	-	-	-	-	6	30	64	-	
Coombe Keynes	-	-	20	80	-	-	-	-	-	-	Public piped supply from Swanage Urban District Council Supply.
Corfe Castle	33	22	3	15	-	-	-	21	6	-	Public piped supply from Swanage Urban District Council Supply.
Stoncliffe	-	-	-	13	-	-	2	44	36	-	Acton and Valley Road Areas mainly by rainwater tanks - unsatisfactory.
Langton Matravers	17	39	-	-	-	-	7	15	-	22	
Studland	-	-	60	20	-	-	-	13	-	7	
Tynemouth	-	-	12	64	-	-	2	22	-	-	
Bloxworth	-	-	-	-	-	-	20	80	-	-	5% houses supplement their supply from streams in dry weather. Water supplies in parish are poor.
Lytebott Hester	95	-	-	-	-	-	4	1	-	-	
Lytebott Matravers	-	-	-	-	10	-	50	40	-	-	
Mercton	-	-	-	-	-	-	50	50	-	-	
Tordun	-	-	-	-	64	-	10	25	1	-	
Tenorsmuddlo	-	-	100	-	-	-	-	-	-	-	
Boal	-	-	15	60	-	-	20	5	-	-	32 council houses supplied by Bovington Camp supply are included in the private estate piped supplies.
Winfrith	-	-	5	70	-	-	5	20	-	-	
Bere Regis	-	-	5	-	-	-	10	84	1	-	
affpuddlo	-	-	96	-	-	-	-	4	-	-	
Chalden Herri	-	-	4	66	30	-	-	-	-	-	
East Stone	-	-	-	-	-	-	5	88	7	-	
Whole District	19.8	4.9	10.7	19.0	5.5	-	8.9	25.3	2.1	3.7	

The percentage of the population supplied by the various types of supply closely approximate the percentage of houses supplied.

Meat and Food Inspection.

Inspection of Meat.

Visits to Slaughterhouses	..	..	..	112
" " Shops	..	..	..	32

Visits to:-

Butchers	..	..	..	25
Grocers	..	..	..	51
Cowsheds	..	..	..	195
Dairies and Milkshops	..	..	..	40
Food Preparation premises	70

Visits in connection with sampling.

Milk - Bacteriological	46
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Notices Served.

Number of informal notices served	157
" " " " complied with	57
" " " " outstanding	100
" " statutory " served	..	..	14
" " " " complied with	..	..	2
" " " " outstanding	..	..	12

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

Two hundred and thirty-five farms were inspected during the year; 11 notices were served on owners in respect of defects, 10 of these had been complied with and one was outstanding at the end of the year.

The total number of producers on the register at the end of the year was 287. There are no milkshops in the district. A total of 235 visits were made to cowsheds and dairies.

The general standard of cowsheds and dairies, with few exceptions, is fairly good. As mentioned in previous reports the principal handicap in the production of milk of a satisfactory standard of cleanliness is the absence of an adequate supply of water of a satisfactory standard of purity.

Milk (Special Designations) Regulations, 1936 to 1941.

The following licences were in force at the end of the year:-

Number of Tuberculin Tested Milk Producers	..	..	41
" " Pasteurising Establishments	..	..	2
" " Accredited Milk Producers	..	..	82

Pasteurised Milk.

Regular visits were made to pasteurising and bottling establishments in the district.

Pasteurising plants were inspected and recording thermometers were checked with a standard test thermometer. Samples are taken regularly for the phosphatase test.

Total samples of pasteurised milk taken	..	..	40
Number of samples which passed the phosphatase test	..	..	33
" " " " failed to pass the phosphatase test	1 @ 4 units		
	1 @ 8 "		
	2 @ 20 "		

1 sample was broken in transit

Meat and Food Inspection.

Slaughtering of animals at the Government Controlled Slaughterhouse in the district ceased on 23rd June, 1944.

Carcases Inspected and Condemned as Unfit for Human Consumption.

				Cattle (exclud- ing Cows)	Cows	Calves	Sheep and Pigs Lambs
Further killed	...	...	...	93	401	2217	3715
Further inspected	...	...	...	93	401	2217	3715
All Diseases except Tuberculosis.							
Whole carcases condemned	...	...	...	-	6	1	-
Carcases of which some part or organ was condemned	...	...	...	-	101	1	17
Percentage of the number inspected affected with disease, other than tuberculosis	...	...	...	-	26.6	0.09	. 5
Tuberculosis only.							
Whole carcases condemned	...	...	...	1	13	1	-
Carcases of which some part or organ was condemned	...	...	...	-	42	1	-
Percentage of the number inspected affected with tuberculosis	...	...	...	1.07	13.71	0.09	-

Total weight of meat condemned during the year ... 7 tons 14 cwts.

Knacker's Yards.

There is one licensed Knacker's Yard in the district.

Watercross.

Watercross is grown in three areas, Bere Regis, Wool, and Waddock Cross near Dorchester. Water is supplied to the cross beds by artesian springs. Visits of inspection were made during the year and conditions were found in all cases to be satisfactory.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

A total of 68 cases of Sonne dysentery were notified during the year. This is only a small percentage of the total number of cases which occurred in the district, as many cases were not ill enough to seek medical advice, in others the true nature of the disease was not confirmed by bacteriological examination and as a result were never notified to the Medical Officer of Health.

Fifty-seven cases occurred amongst the pupils and staff at a residential school. The facts relating to this outbreak were reported at the time to the Council and later a full account of the outbreak was published in the November 1944 number of the Monthly Bulletin of the Ministry of Health and the Emergency Public Health Laboratory Service, the following of which is a copy:-

" AN OUTBREAK OF SONNE DYSENTERY AT A RESIDENTIAL SCHOOL.
E. J. O'Keefe, M.R.C.S., L.R.C.P., D.P.H., Assistant County M.O.H., and M.O.H.,
Weymouth and Swanage District, and T. V. Cooper, M.B., B.S., Pathologist to
the County of Dorset.

The following is an account of an outbreak of Sonne dysentery at a residential school. There were at the time 97 resident children, 3 day pupils, and a professional and domestic staff of 30, making a total of 130 persons. The children were of both sexes and were mostly between 5 and 15 years of age. Notification of the outbreak was first received on July 21 as the result of a finding of Bact. sonnei in scrapes of faeces submitted to the County Laboratory from three of the children on July 19. The outbreak had begun about July 5. Table 1 gives the distribution of cases among the children and staff.

TABLE I

	Date of Onset	Staff	Children
Cases	(July 3-9	6	7
	(" 10-16	1	12
	(" 17-23	0	16
	(" 24-30	1	4
	(" 31-Aug. 6	1	1
Latent infections	(July 24-30	0	3
	(" 31-Aug. 6	0	2
	(Aug. 7-16	1	2
Total		10	47

Specimens of faeces from all these cases were examined after July 21 and Bact. sonnei was isolated from 29 of them. The majority of the patients had vomiting, diarrhoea, abdominal pain, and rise of temperature. Two had rise of temperature only. In 3 cases there were no symptoms, but Bact. sonnei was isolated from the stools. In most of the 28 cases in which the faeces were negative, specimens were not examined for 14 to 28 days after the onset of the attack.

Of the cases occurring among the staff, two had positive faeces when examined the cook, Miss W., mentioned below, and Miss R.C., a kitchen maid, whose first specimen of faeces on July 22 was negative, but who gave a positive specimen on August 16, although she had never had any symptoms.

Investigation at the School.

Two of the children and two of the staff among the earliest cases gave a history of having lunched recently at a British Restaurant; other children had meals at a school canteen in a town about 10 miles away. Inquiries showed that there were no recent or suspected cases in these two areas. The last recent admission to the school was a boy who arrived on June 5.

The water supply was from two sources:- (i) a well on a river bank; the water from this source was filtered and chlorinated and was known to be bacteriologically satisfactory after treatment; (ii) an old well; this water was heavily contaminated but had been used for domestic purposes other than drinking when the supply from (i) was inadequate. The supplies from both wells were examined on July 21 for the presence of Bact. sonnei, but with negative results. Nevertheless instructions were given to discontinue the use of water from the old well.

The school milk supply had been changed from dairyfarm A to dairyfarm B; the last supply of milk from dairyfarm A was received on June 19. A sample of milk (unpasteurised) as supplied from dairyfarm B was collected at the school on July 21, but no organisms of the dysentery group were isolated.

Specimens of faeces from the staff were submitted when it was discovered that a cook, Miss W., was excreting large numbers of Bact. sonnei. Miss W. gave a history of diarrhoea and vomiting which began July 7; she returned to work in the kitchen on July 13, but was immediately isolated for treatment of the carrier state when Bact. sonnei had been found in her faeces.

Instructions were given for boiling all milk received at the school. At a subsequent visit to the school complaints were made by the staff of the difficulty in boiling the milk on the kitchen ranges, and it is safe to assume that for a few days the instructions were not carried out.

Investigations at Dairyfarm B.

Inquiries at dairyfarm B revealed no history of illness suggestive of dysentery among the milkers or those who handled the milk. Specimens of faeces from the dairy workers were refused. In addition to supplying the school, this farm supplies six households. Visits were paid to all the households supplied. Only at household No. 6 was a history of illness obtained; here the father, mother, and three children gave a history of diarrhoea and vomiting, one in April, two in May, and two in July. Specimens of faeces from all were negative for Bact. sonnei. Prior to July 2 this family was supplied with milk from dairyfarm A.

Investigations at Dairyfarm A.

Specimens of faeces were submitted for examination on July 25 from all the dairy workers at this farm. One from Miss J. P. was found to be positive for Bact. sonnei; this girl gave a history of attacks of diarrhoea and vomiting in the last week of May and in the first week of July and occasional abdominal discomfort since the last attack. Samples of milk taken from the house of the dairyfarmer and from the house of Miss J. P. on July 26 were negative for Bact. sonnei.

The milk from this dairyfarm is supplied to ten households, in six of which the occupants gave a history of recent attacks of diarrhoea and vomiting.

Specimens of faeces from these households were submitted for examination. One specimen from a child aged 4½ years, whose brother is a milker at the dairyfarm, was found to be positive for Bact. sonnei. In this instance none of the ten occupants of the household gave a history of gastro-intestinal disturbance. One household with a negative history refused specimens.

The period of the maximum incidence of cases, seven cases on July 18 and four cases on July 19, was on the 4th and 5th days following the return of the cook, Miss J., to her duties in the kitchen. The cook was admitted to the infectious diseases hospital on July 22 and thereafter the incidence of cases tailed off.

Origin of the outbreak.

In investigating the origin of this outbreak of dysentery, the following possibilities were considered:-

1. That the members of the staff or pupils became infected at the British restaurant or school canteen. The likelihood of this was ruled out as there were no known or suspected cases in either area.

2. That the infection was water-borne. It was known that the main supply was bacteriologically very unsatisfactory before treatment. An additional supply from a very unsatisfactory well was also used at times, though not for drinking. Examination of the waters, however, did not support this possibility.

3. That infection was introduced into the school by a carrier from outside. One of the day pupils attending the school was a boy 9 years old, the son of the dairy farmer at farm A, who gave a history of diarrhoea and sickness during the end of June. One of the daily domestic workers came from the family of a worker at farm A and also gave a history of diarrhoea during the last week in June. There were five other daily workers and one other day pupil, none of whom gave a history of recent gastro-intestinal disturbance. Specimens of faeces from all day pupils and daily workers were negative.

A doctor living five miles from the school reported that in the middle of June there were about 200 cases or more of diarrhoea and vomiting with abdominal pain and rise of temperature to 103° F. in the village and neighbourhood. There is no bacteriological evidence that this was a Sonne dysentery outbreak, as no specimens were submitted for examination. Evidence that the infection was introduced by a carrier is certainly not strong.

4. That the milk supply was the vehicle of infection. No pasteurised milk is available in this area, and, as mentioned above, the raw supply had been changed on June 20 from dairyfarm A to dairyfarm B.

(a) Present supply. A sample of the present supply from dairyfarm B gave negative bacteriological results. There was no history of gastro-intestinal illness among the dairyhands. In one of the households supplied by this dairyfarm, however, there was a history of gastro-enteritis first occurring when their milk supply came from dairyfarm A.

(b) Milk supply to school prior to June 20, from dairyfarm A. It was found that a milker at this farm (Miss J. P.), who gave a history of an attack of diarrhoea and vomiting commencing in the last week of May, was a carrier of Bact. sonnei. In one other consumer of this milk, a child whose brother is a milker at the farm, Sonne dysentery bacilli were found in a specimen of faeces. Members of six out of ten households supplied by this dairy gave a history of recent attacks of diarrhoea and vomiting.

Although the samples of milk taken from this supply were negative for Bact. sonnei, it is probable that it was infected by the milker J.P. at various times. There was a lapse of 14 days between the date of the last supply from this farm and the date of onset of the first known case at the school. It is possible that during this fortnight there were symptomless or mild missed cases among the staff or children. The conclusion is that this outbreak of Sonne dysentery was due primarily to milk-borne infection from the dairyfarm A, but that the main spread resulted from contamination of the food or from contact infection within the school. The opportunity for spread of infection within the school was increased by the fact that professional staff and older children helped in the preparation of meals.

The epidemic came at an awkward time for the school management as they wished to close the school for the summer holidays and send the children to their homes. As the epidemic subsided, specimens of faeces from the whole school, pupils and staff, were examined, and those who gave three successive negative specimens were allowed to go on holiday. By August 18, all but four children and one of the domestic staff, a daily worker, were free from infection. These four children were admitted to an infectious diseases hospital and the school was closed.

Much illness and a large amount of laboratory work might have been saved if bacteriological help had been sought at the beginning of the outbreak.

The occurrence of about 200 cases of diarrhoea and vomiting of undetermined cause in one locality illustrates again the necessity for the closest co-operation between medical practitioners and bacteriological investigators.

The need for the pasteurization of all milk is re-emphasized. "

The following are particulars of cases notified during the year:-

Disease	Total cases notified.	Cases admitted to hospital.	Total deaths.
Scarlet Fever	7	5	-
Whooping Cough	40	-	-
Diphtheria	2	2	-
Erysipelas	7	-	-
Measles	122	2	-
Pneumonia	21	1	1
Cerebro Spinal Meningitis	2	1	-
Shame Dysentery	68	4	-
Amoebic Dysentery	1	1	-

Notification Rates per 1,000 Civilian Population.

Disease	England & Wales	148 Smaller Towns	Warrham & Purbeck Rural District
Typhoid Fever	0.01	0.01	0.00
Paratyphoid Fever	0.01	0.01	0.00
Cerebro Spinal Fever	0.05	0.04	0.13
Scarlet Fever	2.40	2.67	0.48
Whooping Cough	2.49	2.29	2.75
Diphthoria	0.58	0.69	0.13
Erysipelas	0.29	0.28	0.48
Smallpox	0.00	0.00	0.00
Measles	4.16	3.94	8.40
Pneumonia	0.97	0.82	1.44
Febrile Pyrexia per 1,000 Total Births (Live and still)	10.34	9.25	0.00

Diphthoria Immunisation.

The percentage of the child population under 5 years of age considered immunised at the end of the year has dropped from 82.2% for 1943 to 53.6%. This is entirely due to the fact that in previous years the figure for the number of children in this age group was based on the 1931 Census figure and children under one year of age were excluded, whereas the figure now used is supplied by the Ministry of Food and is a more correct estimate of the present population in this age group; in addition the children under one year of age are not excluded. When these differences are taken into account it is found that the percentage of the child population immunised in the under five age group has been maintained.

1. Number of children (including temporary residents) who completed the full course of immunisation in the Authority's area between 1st January and 31st December, 1944	...	<table><tr><th>Age under 5 years</th><th>Age 5 years and over, but under 15</th><th>Total</th></tr><tr><td>197</td><td>21</td><td>218</td></tr></table>	Age under 5 years	Age 5 years and over, but under 15	Total	197	21	218
Age under 5 years	Age 5 years and over, but under 15	Total						
197	21	218						
11.								
(A) Approximate estimated number of children in the Authority's area at 31st December, 1944	<table><tr><th>Under 5</th><th>Between 5 & 15</th></tr><tr><td>1505.</td><td>2938</td></tr></table>	Under 5	Between 5 & 15	1505.	2938			
Under 5	Between 5 & 15							
1505.	2938							
(B) Percentage of the child population shown under (A) considered immunised at 31st December, 1944	<table><tr><th>Under 5</th><th>Between 5 & 15</th></tr><tr><td>53.6%</td><td>77.9%</td></tr></table>	Under 5	Between 5 & 15	53.6%	77.9%			
Under 5	Between 5 & 15							
53.6%	77.9%							
(This estimate includes, so far as can be assessed, children immunised in the Authority's area by private arrangement, and children who have come into the area after being immunised elsewhere.)								

Two cases of diphtheria were notified during the year. One case was in an adult and the other a child of 9 years who had been immunised two years previously; C. Diphtheriae Gravis was isolated from this case. The disease was mild and recovery complete.

Scabies and Vermineous Conditions.

The following are particulars of the number of cases of scabies and verminous conditions of persons notified during the year:-

<u>Scabies</u>	<u>Verminous condition of scalp</u>	<u>Verminous condition of body</u>
54	41	-

The majority of cases were children who were notified as excluded from school suffering from scabies or verminous conditions. All cases and homes are visited to ensure that adequate treatment is carried out.

No scabies treatment centre is provided by the Council, but where home treatment cannot be carried out satisfactorily cases are sent to Poole Borough, Bournemouth Borough, or Swanage Urban District Scabies Treatment Centres. At the Poole and Swanage Centres the cost to the Rural District Council is the cost of medicament used, as the treatment is carried out by volunteers. A charge of 4/- per treatment is made at the Bournemouth Borough Centre. No action was necessary under the Scabies Order 1941 during the year.

Number of cases of scabies treated for Wareham and Purbeck Rural District Council at:-

	<u>Children</u>	<u>Adults</u>
Poole Borough Centre	7	14
Bournemouth Borough Centre	8	2
Swanage Urban District Centre	-	1
Swanage Evacuee Sick Bay	3	-
Total:	18	17

Tuberculosis.

No action was necessary during the year under Sec. 172 Public Health Act, 1936, or under The Public Health (Prevention of Tuberculosis) Regulations, 1925.

Particulars of new cases of Tuberculosis and of all deaths during 1944:-

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0	...	...				
1	...	...				
5	...	...				
10	2	1		1				
15	...	...				
20	...	2						
25	1	1	1		1			
35	4	4			1	1		
45	1				1			
55	6							
65 and upwards	1				2			
Totals	15	8	1	1	5	1	-	-

All persons who died from Tuberculosis had been notified as suffering from the disease prior to death.

Cases of Tuberculosis remaining on the Register of Notifications on 31st December, 1944:-

Pulmonary			Non-Pulmonary			Total Cases
Males	Females	Total	Males	Females	Total	
30	25	55	8	8	16	71

